

1.) CORPORATION NAME:

**SMITH REALTY COMPANY**

DUE DATE: **6/30/2011**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: **B.E.**

**AUTH IN VI**

**CT CORPORATION SYSTEM**

**4701 COX RD STE 301**

**GLEN ALLEN, VA 23060-6802**

SCC ID NO: **F1180704**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	200

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

**HENRICO COUNTY**

4.) STATE OR COUNTRY OF INCORPORATION:

**MD**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 9200 E PANORAMA CIRCLE  
SUITE 400

CITY/ST/ZIP: ENGLEWOOD, CO 80112-

7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

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OFFICER

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DIRECTOR

NAME: RICK D JACOBSEN  
TITLE: EVP/TREASURER  
ADDRESS: 9200 EAST PANORAMA CIRCLE  
STE 400  
CITY/ST/ZIP/CO: ENGLEWOOD, CO 80112-

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OFFICER

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DIRECTOR

NAME: JEFF FITTS  
TITLE: DIRECTOR  
ADDRESS: 125 PARK AVE STE 2500  
CITY/ST/ZIP/CO: NEW YORK, NY 10017-

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OFFICER

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DIRECTOR

NAME: ARIEL AMIR  
TITLE: SECRETARY  
ADDRESS: 9200 E PANORAMA CIRCLE  
SUITE 400  
CITY/ST/ZIP/CO: ENGLEWOOD, CO 80112-

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OFFICER

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DIRECTOR

NAME: THOMAS S. REIF  
TITLE: ASST SECRETARY  
ADDRESS: 9200 E PANORAMA CIRCLE  
SUITE 400  
CITY/ST/ZIP/CO: ENGLEWOOD, CO 80112-

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OFFICER

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DIRECTOR

NAME: R SCOT SELLERS  
TITLE: PRESIDENT  
ADDRESS: 9200 E PANORAMA CIRCLE  
SUITE 400  
CITY/ST/ZIP/CO: ENGLEWOOD, CO 80112-

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	NEIL BROWN CDO/EVP 2345 CRYSTAL DRIVE SUITE 1100 ARLINGTON, VA 22202-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	CHARLES E MUELLER JR COO/EVP 9200 E PANORAMA CIRCLE STE 400 ENGLEWOOD, CO 80112-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	MICHAEL R. BERMAN ASST TREASURER 9200 E PANORAMA CIRCLE SUITE 400 ENGLWOOD, CO 80112-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	MARK P. PEPPERCORN SVP 9200 E PANORAMA CIRCLE SUITE 400 ENGLEWOOD, CO 80112-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	CARL WADE VICE PRESIDENT 9200 E PANORAMA CIRCLE SUITE 400 ENGLEWOOD, CO 80112-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	R. MICHAEL SHOMO AGC/SVP 9200 E PANORAMA CIRCLE SUITE 400 ENGLEWOOD, CO 80112-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	ROBERT C LUND JR GVP 9200 E PANORAMA CIR STE 400 ENGLEWOOD, CO 80112-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.			
/s/ ROBERT C LUND JR		ROBERT C LUND JR, GVP	
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT		DATE	
PRINTED NAME AND CORPORATE TITLE			
It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.			